| REQUEST FOR QUOTATION                  |                      |               | SET ASIDE T                    |             | TYPE:   |                          | PAGE                         |                                       | OF PAGES                            |   |                      |         |                 |
|--|----------------------|---------------|--------------------------------|-------------|---|--------------------------|------------------------------|---------------------------------------|-------------------------------------|---|----------------------|---------|-----------------|
| (THIS IS NOT AN ORDER)                 |                      |               |                                |             |   | SB                       |                              | 1                                     |                                     | 12  |                      |         |                 |
| 1. REQUEST NO. 2. DATE ISSUED          |                      | SUED          | 3 REQUISITION/PURCHASE REQUEST |             |   | ΓNO.                     | 4. CERT. FOR NAT. I          |                                       |                                     |   | RATING               |         |                 |
| DTFANM-12-Q-00094                      |                      |               |                                | NM-12-01642 |   |                          |                              | UNDER BDSA REG. 2<br>AND/OR DMS REG.1 |                                     |   |                      |         |                 |
| 5a. ISSUED BY                          | ?                    | l             |                                |             |   |                          | 6. DELIVER BY (Date)         |                                       |                                     |   | 1                    |         |                 |
| Federal                                | Aviation Admi        | nistration    |                                |             |   |                          |                              |                                       |                                     |   | Per Order            |         |                 |
| NAME                                   | 5B. FO               | R INFORMA     | ATION CAI                      | LL (A       | IO COLLECT CAL                                  |                          |                              | _                                     | 7. DELIVE                           |   | OTH                  |         |                 |
| TWINE                                  |                      |               |                                | -           | AREA CODE                                       | PHONE I                  | NUMBE<br>NUMBE               |                                       | ☐ FOB                               | DESTINA   |                      |         | CHEDULE)        |
| Linda Le                               |                      |               |                                |             | 425   | 1                        |                              | 27-2861                               | 9. DESTINATION a. NAME OF CONSIGNEE |   |                      |         |                 |
| Lilida Le                              | e                    |               |                                |             | 423   |                          | 22                           | 27-2801                               | FAA -                               | FAA – Pueblo Memorial Airport b. STREET ADDRESS |                      |         |                 |
|  |                      | 8. TO BE C    | COMPLETI                       |             | Y QUOTER:                                       |                          |                              |                                       |                                     |   |                      |         |                 |
| a. NAME                                |                      |               |                                |             | b. COMPANY                                      |                          | Pueblo Work Center / PUB RTR |                                       |                                     |   |                      | ΓR      |                 |
|  |                      |               |                                |             |   |                          |                              |                                       | 31201                               | Bryan C   | ir                   |         |                 |
| c. STREET AD                           | DRESS                |               |                                |             |   |                          |                              |                                       | c. CITY                             |   |                      |         |                 |
| 1 CITY                                 |                      |               |                                |             | - CTATE   |                          | ZID CO                       | DE                                    | Puebl<br>d. STATE                   | 0   | - ZID CODI           | ,       |                 |
| d. CITY                                |                      |               |                                |             | e. STATE  | Ι.                       | ZIP CO                       | DE                                    |                                     | CO  | e. ZIP CODI          |         | 1902            |
| 10 PLEASE FI                           | URNISH QUOTATIO      | NS TO THE     |                                |             |   |                          |                              |                                       |                                     |   |                      |         | -4803           |
| ISSUING (                              | OFFICE IN BLOCK 5    | A ON OR       |                                |             | 'ANT: This is a reque<br>n this form and return |                          |                              |                                       |                                     |   |                      |         |                 |
| BEFORE C                               | CLOSE OF BUSINES     | S (Date)      |                                |             | paration of the submissindicated by quoter.     |                          |                              |                                       |                                     |   |                      |         |                 |
|  | 5/29/12              |               |                                | quoter.     | , I   | riny repre               | 23CIIIai I                   | nis and/or certi                      | ireations attached                  | i to tilis recqt                                | icsi ioi Quotatio    | ns must | be completed by |
|  | By 3:00 P.M. P       | ST            |                                |             |   |                          |                              |                                       |                                     |   |                      |         |                 |
|  |                      |               |                                |             | DULE (Include app                               | plicable                 |                              |                                       | ocal taxes)                         |   |                      |         |                 |
| ITEM NO.                               |                      | SUPI          | PLIES/SERV                     | /ICES       |   |                          | QI                           | UANTITY                               | UNIT                                | UNI   | T PRICE              |         | AMOUNT          |
| (a)                                    |                      |               | (b)                            |             |   |                          |                              | (c)                                   | (d)                                 |   | (e)                  |         | (f)             |
|  |                      | RF Cab        | ole for l                      | RTI         | 0 linear feet<br>R site reloca                  | tion                     |                              |                                       |                                     |   |                      |         |                 |
| 12. DISCOUNT                           | FOR PROMPT PAY       | MENT OFFER    |                                |             | CALENDAR<br>YS (%)                              |                          | CALENI<br>YS (%)             | DAR                                   | c. 30 CALEND<br>DAYS (%)            | AR  | d. CALENDA<br>NUMBER |         | ENTAGE          |
| 12. DISCOUNT FOR FROM FTATMENT OF ERED |                      |               |                                | ` ′         |   | /                        |                              | - (/                                  |                                     |   |                      |         |                 |
| NOTE: Addi                             | tional provisions an | d representat | ions 🔀                         | are         | are not attach                                  | ed.                      |                              | •                                     |                                     |   |                      |         |                 |
| 13. NAME AND ADDRESS OF QUOTER         |                      |               |                                | 14          |   | ATURE OF PE<br>QUOTATION | RSON AUTHOI                  | RIZED TO                              | 15. DATE OF                         | QUOT  | ATION                |         |                 |
| a. NAME OF QUOTER                      |                      |               |                                |             |   | SIGN                     | NOITATION                    |                                       |                                     |   |                      |         |                 |
| b. STREET ADDRESS                      |                      |               |                                |             |   |                          | 4                            | 6 CIONET                              |                                     |   |                      |         |                 |
| o. DIRECT MUNICIPA                     |                      |               |                                |             | -   |                          |                              |                                       | 6. SIGNEF                           | i<br>I  |                      |         |                 |
|  |                      |               |                                |             | a.  | NAME                     | (Type or print)              |                                       |                                     | b. '  | TELEP:               | HONE    |                 |
| c. COUNTY                              |                      |               |                                |             |   | AREA CODE                |                              |                                       |                                     |   |                      |         |                 |
| d CITV                                 |                      |               | a CTATE                        |             | f. ZIP CODE                                     |                          | THE P (T                     |                                       |                                     |   |                      |         |                 |
| d. CITY e. STATE                       |                      |               | '                              | 1. ZIF CUDE | c.  | c. TITLE (Type or print) |                              |                                       | NUMBER                              |   |                      |         |                 |

#### REQUEST FOR OFFER

The Federal Aviation Administration (FAA) Western Service Area Acquisition Group intends to award a contract for the purchase of 6000 linear feet of 7/8" Heliax RF Cable, and delivery to the RTR Pueblo Memorial Airport in Pueblo, CO. **Delivery shall be FOB Destination by June 22, 2012**. The required equipment is as follows:

| # | Description                       | UoM | Quantity |
|---|-----------------------------------|-----|----------|
| 1 | Andrew LDF5-50A 7/8" Heliax Cable | Ft  | 6000     |
| 2 | Shipping/Delivery                 | Ea  | 1        |

Items requirement is effective from date of award through <u>06/22/2012</u>, after which date the contract has expired and delivery must be withheld. FAA is not required to compensate for deliveries made outside the contract period of performance.

#### CONTRACT ADMINISTRATION DATA

#### **PAYMENTS**

#### Send original invoice/delivery ticket to:

Federal Aviation Administration AMZ-110, Accounts Payable P.O. Box 25710 Oklahoma City, OK 73125

A copy of the invoice shall be submitted to the COR within five (5) working days after the service.

Attn: Michael Calhoon 1601 Lind Ave SW Renton, WA 98057

Payment will not be processed until the invoice submitted from the Contractor has been reviewed and approved by the COR.

#### **INVOICE PROCEDURES**

The Contractor shall be paid in accordance with the contract clauses. Invoices submitted by the Contractor should include, at a minimum: the FAA address, the date the invoice was prepared, the contract number, the Contractor's name and address, and a description of the service(s) provided.

#### LIMITATION OF LIABILITY

The Contractor shall be liable for and shall at all times identify and hold harmless the Government, its officers, agents and employees from and against any and all liability, claims, demands and costs, of whatever kind and nature, for injury to or death of any person or persons and for loss or damage to any property occurring in connection with, or in any way incident to or arising out of performance of this contract, which results in whole or in part from the fault or negligence of the Contractor, subcontractor, or any employee, agent or representative of the Contractor or subcontractor.

#### Offer:

## Offer is being provided for the following items (as listed below) to be delivered to the FAA facilities at Renton, WA.

| # | Part # | Description                    | UoM | Quantity | Price | Total |
|---|--------|--------------------------------|-----|----------|-------|-------|
| 1 |        | Andrew LDF5-50A 7/8" Heliax RF | Ft  | 6000     |       |       |
|   |        | Cable                          |     |          |       |       |
| 2 |        | Shipping/Delivery              | Ea  | 1        |       |       |
|   |        |                                |     |          | TOTAL |       |

#### • Note – Shipper to provide delivery truck with lift gate

| Quotation Submitted By: |               |
|-------------------------|---------------|
| Title/Position:         |               |
| Company:                |               |
| Tax ID Number:          | Date:         |
| Telephone number:       | _ Fax number: |
|                         |               |

#### **Electronic Quotes:**

Electronic quote may be submitted via email to: Linda.A-CTR.Lee @FAA.gov, or faxed to 425-227-1156.

#### **Mailed Quotes:**

Offerors wishing to submit a quote through the U.S. Postal Service, Certified and Registered mail, Special Delivery, or U.S. Postal Express Mail shall be addressed to:

DOT, FEDERAL AVIATION ADMINISTRATION ACQUISITION MANAGEMENT BRANCH – AAQ-530 ATTN: LINDA LEE 1601 LIND AVE SW RENTON, WA 98057

#### HAND CARRIED OUOTES:

HAND-CARRIED QUOTE, <u>HAND DELIVERED</u> by other types of express mail services (Commercial Carrier, e.g. Federal Express, United Parcel Service, Airborne Express, etc.) <u>SHALL BE HAND</u> <u>DELIVERED</u> to:

DOT, FEDERAL AVIATION ADMINISTRATION CUSTOMER SERVICE CENTER (FIRST FLOOR) ACQUISITION MANAGEMENT BRANCH – AAQ-530 ATTN: LINDA LEE 1601 LIND AVE SW RENTON, WA 98057

#### CONTRACT CLAUSES

#### 3.2.2.5-1 Terms and Conditions-Simplified Purchases (Services and Supplies) (July 2011)

(a) 3.1-1 Clauses and Provisions Incorporated by Reference (July 2011)

This screening information request (SIR) or contract, as applicable, incorporates by reference the provisions or clauses listed below with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make the full text available, or offerors and contractors may obtain the full text via Internet at: <a href="http://conwrite.faa.gov">http://conwrite.faa.gov</a>.

3.1.7-2 Organizational Conflicts of Interest (August 1997) 3.2.2.3-1 False Statements in Offers (July 2004) Protecting the Government's Interest when Subcontracting with Contractors Debarred, 3.2.2.7-6 Suspended, or Proposed for Debarment(April 2011) 3.2.5-1 Officials Not to Benefit (April 1996) Gratuities or Gifts (January 1999) 3.2.5-3 3.2.5-4 Contingent Fees (October 1996) 3.2.5-5 Anti-Kickback Procedures (October 2010) 3.2.5-8 Whistleblower Protection for Contractor Employees (April 1996) Payments (April 1996) 3.3.1-1 Assignment of Claims (April 1996) 3.3.1-15 Central Contractor Registration (January 2008) 3.3.1-33 Payment by Electronic Funds Transfer/Central Contractor Registration (February 2009) 3.3.1-34 FAA Cost Principles (October 1996) 3.3.2-1 3.6.1-7 Limitations on Subcontracting (July 2008) 3.6.2-9 Equal Opportunity (August 1998) Affirmative Action for Workers With Disabilities (October 2010) 3.6.2-13 3.6.2-39 Trafficking in Persons (January 2008) 3.6.3-16 Drug Free Workplace (February 2009) 3.6.4-2 Buy American Act-Supplies (July 2010) 3.6.4-10 Restrictions on Certain Foreign Purchases (January 2010) Contract Disputes (September 2009) 3.9.1.1-1 3.9.1-2 Protest After Award (August 1997) 3.9.1-3 Protest (November 2002) 3.10.1-7 Bankruptcy (April 1996) 3.10.1-25 Novation and Change-of-Name Agreements (October 2007) 3.13-5 Seat Belt Use by Contractor Employees (January 1999) Reducing Text Messaging While Driving (April 2010)(b) 3.13-13

The Contractor shall comply with the following additional AMS clauses, incorporated by reference, unless the circumstances do not apply:

| 3.1.7-6  | Disclosure of Certain Employee Relationships (July 2009)                            |
|----------|---|
| 3.2.5-7  | Disclosure Regarding Payments to Influence Certain Federal Transactions (June 1999) |
| 3.3.1-24 | Fast Payment Procedures (October 1996)  |
| 3.6.2-2  | Convict Labor (April 1996)  |
| 3.6.2-4  | Walsh-Healey Public Contracts Act (April 1996)                                      |
| 3.6.2-5  | Certification of Nonsegregated Facilities (February 2009)                           |
| 3.6.2-12 | Affirmative Action for Special Disabled and Vietnam Era Veterans (April 2007)       |
| 3.6.2-14 | Employment Reports on Special Disabled Veterans and Veterans of Vietnam Era (April  |
| 2007)    |   |
| 3.6.2-28 | Service Contract Act of 1965, as Amended (April 1996)                               |

3.6.2-31 Fair Labor Standards Act and Service Contract Act-Price Adjustment (April 1996)

(c) The Contractor shall comply with the following AMS provisions or clauses that the Contracting Officer has indicated as being incorporated by reference: \_3.6.3-13 Recycle Content and Environmentally Preferable Products (April 2009) 3.6.3-20 IEEE 1680 Standard for the Environmental Assessment of Personal Computers (January 2011) 3.6.3-20 Alternate I IEEE 1680 Standard for the Environmental Assessment of Personal Computers (January 2011) 3.10-1-8 Suspension of Work (August 1998) X 3.10.1-9 Stop Work Order (October 1996) \_\_\_\_3.10.1-9 Stop Work Order, Alternate I (October 1996) \_\_\_\_3.10.1-10 Stop Work Order-Facilities (June 1999) \_3.10.1-11 Government Delay of Work (April 1996) X 3.10.1-12 Changes-Fixed Price (April 1996) 3.10.1-12 Changes-Fixed Price, Alt I (April 1996) X 3.10.1-12 Changes-Fixed Price, Alt II (April 1996) \_\_\_\_3.10.1-12 Changes-Fixed Price, Alt III (April 1996) \_\_\_\_3.10.1-12 Changes-Fixed Price, Alt IV (April 1996) \_\_\_\_3.10.1-12 Changes-Fixed Price, Alt V (April 1996) 3.10.1-13 Changes-Cost-Reimbursement (April 1996) \_3.10.1-13 Changes-Cost-Reimbursement, Alt I (April 1996) \_\_3.10.1-13 Changes-Cost-Reimbursement, Alt II (April 1996) 3.10.1-13 Changes-Cost-Reimbursement, Alt III (April 1996) \_\_\_\_3.10.1-13 Changes-Cost-Reimbursement, Alt IV (April 1996) 3.10.1-13 Changes-Cost-Reimbursement, Alt V (April 1996) 3.10.1-26 Contractor Performance Assessment Reporting System (July 2011) X \_3.10.6-1 Termination for Convenience of the Government (Fixed-Price) (October 1996) \_3.10.6-2 Termination for Convenience of the Government (Educational and Other Nonprofit Institutions) (October 1996) 3.10.6-3 Termination (Cost-Reimbursement) (October 1996) 3.10.6-3, Alt I Termination (Cost-Reimbursement) Alternate I (January 1998) 3.10.6-3, Alt II Termination (Cost-Reimbursement) Alternate II (October 1996) \_\_\_\_3.10.6-3, Alt III Termination (Cost-Reimbursement) Alternate III (October 1996) 3.10.6-3/alt4 Termination (Cost-Reimbursement) Alternate IV (October 1996) \_3.10.6-3/alt5 Termination (Cost-Reimbursement) Alternate V (October 1996) X \_3.10.6-4 Default (Fixed Price Supply and Services) (October 1996) \_\_\_\_3.10.6-5 Default (Fixed-Price Research and Development) (October 1996) \_\_\_\_3.10.6-6 Default (Fixed Price Construction) (October 1996)

(d) Warranty. The Contractor warrants and implies that the items delivered hereunder are merchantable and fit for use for the particular purpose described in this contract.

#### LIST OF ATTACHMENTS

The following documents, exhibits and/or attachments are incorporated into this solicitation and any resulting contract:

1. Business Declaration Form - 1 Page

3.10.6-7 Excusable Delays (October 1996)

# REPRESENTATIONS, CERTIFICATIONS AND OTHER STATEMENTS OF OFFERORS

#### 3.1-1 Clauses and Provisions Incorporated by Reference (July 2011)

This screening information request (SIR) or contract, as applicable, incorporates by reference the provisions or clauses listed below with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make the full text available, or offerors and contractors may obtain the full text via Internet at: <a href="http://conwrite.faa.gov">http://conwrite.faa.gov</a> (on this web page, select "Search and View Clauses").

| 3.2.5-2<br>3.2.2.3-10 | Independent Price Determination (October 1996) Type of Business Organization (July 2004)  |
|-----------------------|---|
| By checking           | the applicable box, the offeror (you) represents that   |
|                       | rate as [] a corporation incorporated under the laws of the State of  |
|                       | e a foreign entity, you operate as [] an individual, [] a partnership, [] a nonprofit a, [] a joint venture, or [] a corporation, registered for business in  |
| (country)             | ·   |
| (End of prov          | vision)   |
| 3.2.2.3-15            | Authorized Negotiators (July 2004)  |
| connection v          | states that the following persons are authorized to negotiate on your behalf with the FAA in with this offer:   |
| Title:                |   |
| Phone numb            | er:   |
| (End of prov          | vision)   |
| 3.2.2.3-70            | Taxpayer Identification (July 2004)   |
| (a) Definitio         | ns.   |
| affiliated gro        | amon parent," as used in this clause, means a corporate entity that owns or controls an oup of corporations that files an offeror's (you, your) Federal income tax returns on a basis, and of which you are a member. |
| (2) "Corp             | porate status," as used in this clause, means a designation as to whether you are a corporate   |

(3) "Taxpayer Identification Number (TIN)," as used in this clause, means the number the Internal

entity, an unincorporated entity (for example, sole proprietorship or partnership), or a corporation

Revenue Service (IRS) requires you use in reporting income tax and other returns.

providing medical and health care services.

issued by IRS. The FAA will use this information to collect and report on any delinquent amounts arising out of your relation with the Federal Government, under Public Law 104 -134, the Debt Collection Improvement Act of 1996, Section 31001(I)(3). If the resulting contract is subject to the reporting requirements and you refuse or fail to provide the information, the Contracting Officer (CO) may reduce your payments 31 percent under the contract. (c) Taxpayer Identification Number (TIN). [ ] TIN: [] TIN has been applied for. [] TIN is not required because: [ ] Offeror is a nonresident alien, foreign corporation, or foreign partnership that does not leave income effectively connected with the conduct of a trade or business in the U.S. and does not have an office or place of business or a fiscal paying agent in the U.S.: [ ] Offeror is an agency or instrumentality of a foreign government; [ ] Offeror is an agency or instrumentality of a Federal, state, or local government; Other--State basis. \_\_\_\_\_\_. (d) Corporate Status. [ ] Corporation providing medical and health care services, or engaged in the billing and collecting of payments for such services; [] Other corporate entity [] Not a corporate entity [] Sole proprietorship [ ] Partnership Hospital or extended care facility described in 26 CFR 501(c)(3) that is exempt from taxation under 26 CFR 501(a). (e) Common Parent. [] A common parent does not own or control the offeror as defined in paragraph (a). [ ] Name and TIN of common parent: TIN 3.3.1-35 Certification of Registration in Central Contractor Registration (CCR) (April 2006) In accordance with Clause 3.3.1-33, Central Contractor Registration, offeror certifies that they are registered in the CCR Database and have entered all mandatory information including the DUNS or DUNS+4 Number. Title: \_\_\_\_\_

(b) All offerors must submit the information required in paragraphs (c) through (e) of this provision to comply with reporting requirements of 26 U.S.C. 6041, 6041A, and 6050M and implementing regulations

Phone Number:

| 3.6.2-3  | Walsh-Healey Public Contracts Act Representation (October 2010) The offeror represents as a part of this offer that the offeror:  |
|--|---|
|  | is [] or is not [] a regular dealer in, or  |
|  | is [] or is not [] a manufacturer of, the supplies offered.   |
| 3.6.2-6  | <b>Previous Contracts and Compliance Reports</b> (May 1997)   |
| subject eithe<br>Section 310<br>11114; (b) In                                | represents that(a) It [] has, [] has not, participated in a previous contract or subcontract or to the "Equal Opportunity" clause of this solicitation, the clause originally contained in of Executive Order No. 10925, or the clause contained in Section 201 of Executive Order No. t [] has, [] has not, filed all required compliance reports; and (c) Representations indicating of required compliance reports, signed by proposed subcontractors, will be obtained before awards.   |
| 3.6.2-8  | Affirmative Action Compliance (April 1996)  |
| on file, at ea<br>Secretary of   | represents that (a) it [] has developed and has on file, [] has not developed and does not have ch establishment, affirmative action programs required by the rules and regulations of the Labor (41 CFR 60-1 and 60-2), or (b) it [] has not previously had contracts subject to the mative action programs requirement of the rules and regulations of the Secretary of Labor.  |
| 3.6.2-38   | Certification of Knowledge Regarding Child Labor End Products (July 2007)   |
| (a) Definition   | on.   |
| (i) Exacted f<br>and for whice<br>(ii) Performed                             | Indentured child labor," as used in this clause, means all work or service: From any person under the age of 18 under the menace of any penalty for its nonperformance of the worker does not offer itself voluntarily; or ed by any person under the age of 18 pursuant to a contract, the enforcement of which can be ed by process or penalties.   |
| included in t<br>Labor, ident  | nd Products. The following end product(s) being acquired under this solicitation is (are) the List of Products Requiring Contractor Certification as to Forced or Indentured Child ified by their country of origin. There is a reasonable basis that the listed end products from untries of origin may have been mined, produced, or manufactured by forced or indentured   |
| Listed End I   | Product Listed Countries of Origin  |
|  |   |
| appropriate [] (1) The o mined, prod [] (2) The o produced, or that it has m | tion. The FAA will not make award to an offeror unless the offeror, by checking the block, certifies to either paragraph (c)(1) or (c)(2) of this provision.  fferor will not supply any end product listed in paragraph (b) of this provision that was uced, or manufactured in a corresponding country as listed for that end product.  fferor may supply an end product listed in paragraph (b) of this provision that was mined, remanufactured in the corresponding country as listed for that product, and the offeror certifies ade a good faith effort to determine whether forced or indentured child labor was used to ce, or manufacture that end product. |

#### **3.6.4-15 Buy American Act Certificate** (July 1996)

(a) The offeror certifies that each end product, except as listed below, is a domestic end product (as defined in the clause "Buy American Act-Supplies,") and components of unknown origin are considered to have been mined, produced, or manufactured outside the United States.

| Excluded End Product Country of Origin |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  |  |
| [list as necessary]                    |  |  |  |  |  |

(b) The offeror agrees to furnish any additional information as the Contracting Officer may request to verify the above information and to evaluate the offer. Offerors may obtain from the Contracting Officer lists of articles, materials, and supplies accepted from the Buy American Act.

#### INSTRUCTIONS, CONDITIONS, AND NOTICES TO OFFERORS

#### 3.1-1 Clauses and Provisions Incorporated by Reference (December 2005)

This screening information request (SIR) or contract, as applicable, incorporates by reference the provisions or clauses listed below with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make the full text available, or offerors and contractors may obtain the full text via Internet at: <a href="http://conwrite.faa.gov">http://conwrite.faa.gov</a> (on this web page, select "Search and View Clauses").

- **3.2.2.3-1** False Statements in Offers (July 2004)
- **3.2.2.3-11** Unnecessarily Elaborate Submittals (July 2004)
- **3.2.2.3-12** Amendments to Screening Information Requests (July 2004)
- **3.2.2.3-13** Submission of Information/Documentation/Offers (July 2004)
- 3.2.2.3-14 Late Submissions, Modifications, and Withdrawals of Submittals (July 2004)
- **3.2.2.3-16** Restricting, Disclosing and Using Data (July 2004)
- **3.2.2.3-17 Preparing Offers** (July 2004)
- **3.2.2.3-18** Prospective Offeror's Requests for Explanations (March 2009)
- **3.2.2.3-19** Contract Award (July 2004)
- **3.2.2.3-20** Electronic Offers (July 2004)
- (a) The offeror (you) may submit responses to this SIR by the following electronic means: fax or e-mail. Your offer must arrive at the place and by the time specified in the SIR.
- (b) Electronic offers must refer to this SIR and include, as applicable, the item or sub-items, quantities, unit prices, time and place of delivery, all representations and other information required and a statement specifying the extent of your agreement with all the FAA's (we) terms, conditions, and provisions.
- (c) We may decline to consider electronic offers that do not include required information, or that reject any of the terms, conditions and provisions of the SIR.
- (d) We reserve the right to make award solely on the electronic offer. However, if the CO requests, you must promptly submit the complete original (hard copy) signed proposal.
- (e) Send your offer electronically to Linda Lee at <u>Linda.A-CTR.Lee@faa.gov</u> or by fax at (425) 227-1156.

(f) If you chose to send your offer electronically, we will not be responsible for any failure attributable to transmitting or receiving the offer. You may confirm receipt of offer by calling the Linda Lee at (425) 227-2861

#### **3.13-1 Approval of Contract** (October 2001)

This contract is subject to the written approval of the <u>Contracting Officer</u> and shall not be binding until so approved.

## 3.13-4 Contractor Identification Number- Data Universal Numbering System (DUNS) Number (April 2006)

(a) Definitions. As used in this clause

"Contractor Identification Number," as used in this provision, means "Data Universal Numbering System (DUNS) number, which is a nine-digit number assigned by Dun and Bradstreet Information Services, to identify unique business entities (taken from CCR clause)

"Data Universal Numbering System +4 (DUNS+4) number" means the DUNS number assigned by D&B plus a 4-character suffix that may be assigned by a business concern. (D&B has no affiliation with this 4-character suffix.) This 4-character suffix may be assigned at the discretion of the business concern to establish additional CCR records for identifying alternative Electronic Funds Transfer.

(b) Contractor identification is essential for receiving payment and complying with statutory contract reporting requirements. Therefore, the offeror shall provide its DUNS or DUNS+4 number below. The DUNS number will be used by the Contracting Officer to verify that the offeror is registered in the CCR database.

| D. T. T. T. C. | OD DINI |            |
|----------------|---------|------------|
| DUNS           | OR DUNS | S+4 NUMBER |

- (c) If the offeror does not have a DUNS number, it should contact Dun and Bradstreet directly to obtain one.
- (1) An offeror may obtain a DUNS number
- (i) If located within the United States, by calling Dun and Bradstreet at 1-866-705-5711 or via the Internet at http://www.dnb.com/; or
  - (ii) If located outside the United States, by contacting the local Dun and Bradstreet office.
- (2) The offeror should be prepared to provide the following information:
- (i) Company legal business.
- (ii) Tradestyle, doing business, or other name by which your entity is commonly recognized.
- (iii) Company Physical Street Address, City, State, and ZIP Code.
- (iv) Company Mailing Address, City, State and ZIP Code (if different from physical street address).
- (v) Company Telephone Number.
- (vi) Date the company was started.
- (vii) Number of employees at your location.
- (viii) Chief executive officer/key manager.
- (ix) Line of business (industry).
- (x) Company Headquarters name and address (reporting relationship within your entity).

#### **EVALUATION FACTORS FOR AWARD**

The FAA will award a contract resulting from this solicitation to the responsive, responsible offeror whose offer best meets FAA requirements as specified and offers the best value to the FAA based on fair and reasonable price.

### **BUSINESS DECLARATION**

| 1    | Name of Fi          | rm:   |                            |                    |                      | Tax identification No.                                | •         |
|------|---------------------|---|----------------------------|--------------------|----------------------|---|-----------|
| 2    | Address of          | Firm:   |                            |                    |                      | DUNS No.:   |           |
| 3    | a. Telephon         | e Number of Firm:   |                            | b. Fax             | Number of Firm:      |   |           |
| 4    | a. Name of          | Person Making Declaration   | 1                          |                    |                      |   |           |
|      | b. Telephon         | e Number of Person Makin  | g Declaration              |                    |                      |   |           |
|      | c. Position         | Held in the Company   |                            |                    |                      |   |           |
| 5    | Controlling         | Interest in Company ("X"  | all appropriate boxes      | )                  |                      |   |           |
|      | a. Black            | American b.   | Hispanic American          | c. Nativ           | e American           | d. Asian American                                     |           |
|      | e. Othe             | r Minority (Specify)  | f. (                       | Other (Specify)    |                      |   |           |
|      | g. Fema             | ale h. Male i.  | 8(a) Certified (Certified) | ication letter att | ached) [] j. Servi   | ce Disabled Veteran Small                             | Business  |
| 6    |                     | n identified in Number 4 ab<br>nancial and management de<br>b. No (If "No | ecisions?                  |                    |                      | decision making, including n who has this authority.) | g but not |
| 7    |                     | usiness (Specify all service  | -                          | (b) No. of E.      | mplovees             |   |           |
| 9    |                     | _   | e Ownership                | _                  |                      | urtnership  |           |
|      | □ c.                | Other (Explain)   | - C                        |                    |                      |   |           |
|      | 10.                 | Gross receipts of th  | he firm for the last thr   | ee years:          | a.1. Year<br>Ending: | b.1. Gross<br>Receipts                                |           |
|      |                     | a.2. Year<br>Ending:  | b.2. Gross<br>Receipts     |                    | a.3. Year Ending:    | b.3. Gross Receipts                                   |           |
|      | 11.                 | Is the firm a small busine  | ess? a. Yes                | b. No              |                      |   |           |
|      | 12.                 | Is the firm a service disab   | oled veteran owned sm      | nall business?     | a. Yes               | o. No   |           |
|      | 13.                 | Is the firm a socially and  | economically disadva       | ntaged small bu    | siness? a. Ye        | es 🗌 b. No  |           |
|      |                     | AT THE FOREGOING ST<br>D CORRECT TO THE 1                                 |                            |                    | ORMATION, A          | ND BELIEF. I AM AW                                    | ARE       |
| TH   | AT I AM SU          | BJECT TO CRIMINAL I   | PROSECUTION UN             | DER THE PRO        | OVISIONS OF 18       | USCS 1001.  |           |
| 5    | 14. a.<br>Signature |   |                            | b. Date:           |                      |   |           |
| c. 7 | Typed Name          |   |                            | d. Title:          |                      |   |           |